ST. DOMINIC VILLA 2375 SINSINAWA ROAM

2375 SINSINAWA ROAD				
HAZEL GREEN 53811 Phone: (608) 748-9814		Ownership:	Non-Profit Corporation
Operated from 1/1 To 12/31 Days of	Operation: 36	65	Highest Level License:	Skilled
Operate in Conjunction with Hospital?	No	0	Operate in Conjunction with CBRF?	No
Number of Beds Set Up and Staffed (12/	31/02): 58	8	Title 18 (Medicare) Certified?	Yes
Total Licensed Bed Capacity (12/31/02):	58	8	Title 19 (Medicaid) Certified?	Yes
Number of Residents on 12/31/02:	57	7	Average Daily Census:	58
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Services Provided to Non-Residents	Age, Sex, a	and Primary	Diagnosis of Residents (12/31/02)	Length of Stay (12/

Services Provided to Non-Residents	Age, Sex, and Primary Diagn	Length of Stay (12/31/02)						
Home Health Care Supp. Home Care-Personal Care	No No			Age Groups 	% 		15.8 84.2	
Supp. Home Care-Household Services	No	Developmental Disabilities		Under 65	0.0	More Than 4 Years	0.0	
Day Services	No	Mental Illness (Org./Psy)	43.9	65 - 74	5.3			
Respite Care	No	Mental Illness (Other)	12.3	75 - 84	19.3		100.0	
Adult Day Care No		Alcohol & Other Drug Abuse	0.0	85 - 94	68.4	* * * * * * * * * * * * * * * * * * *	*****	
Adult Day Health Care No		Para-, Quadra-, Hemiplegic	0.0	95 & Over	ver 7.0 Full-Time Equiva			
Congregate Meals No		Cancer	3.5	3.5		Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/02)		
Other Meals	No	Cardiovascular	26.3	65 & Over	100.0			
Transportation	No	Cerebrovascular	5.3			RNs	14.3	
Referral Service	No	Diabetes	1.8	Sex	용	LPNs	5.2	
Other Services	No	Respiratory	1.8			Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	5.3	Male	0.0	Aides, & Orderlies	33.8	
Mentally Ill	No			Female	100.0	1		
Provide Day Programming for			100.0			I		
Developmentally Disabled	No	I		l	100.0	1		

Method of Reimbursement

		edicare			edicaid itle 19		Other		Private Pay			Family Care			Managed Care					
Level of Care	No.	90	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	0/0	Per Diem (\$)	No.	90	Per Diem (\$)	No.	0/0	Per Diem (\$)	No.	90	Per Diem (\$)	Total Resi- dents	
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	0	0.0	0	49	87.5	112	0	0.0	0	1	100.0	130	0	0.0	0	0	0.0	0	50	87.7
Intermediate				7	12.5	94	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	7	12.3
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		56	100.0		0	0.0		1	100.0		0	0.0		0	0.0		57	100.0

ST. DOMINIC VILLA

Admissions, Discharges, and	1	Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02											
Deaths During Reporting Period	1												
					% Needing		Total						
Percent Admissions from:		Activities of	90	As	sistance of	% Totally	Number of						
Private Home/No Home Health	0.0	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents						
Private Home/With Home Health	0.0	Bathing	0.0		75.4	24.6	57						
Other Nursing Homes	0.0	Dressing	5.3		61.4	33.3	57						
Acute Care Hospitals	20.0	Transferring	19.3		63.2	17.5	57						
Psych. HospMR/DD Facilities	0.0	Toilet Use	17.5		33.3	49.1	57						
Rehabilitation Hospitals	0.0		36.8			3.5	57						
Other Locations	80.0 *	******	*****	*****	******	********	*****						
Total Number of Admissions	15	Continence		%	Special Treatm	nents	%						
Percent Discharges To:	1	Indwelling Or Exter	nal Catheter	1.8	Receiving Re	espiratory Care	8.8						
Private Home/No Home Health	0.0	Occ/Freq. Incontine	nt of Bladder	61.4	Receiving Tr	racheostomy Care	0.0						
Private Home/With Home Health	0.0	Occ/Freq. Incontine	nt of Bowel	36.8	Receiving Su	actioning	0.0						
Other Nursing Homes	0.0				Receiving Os	stomy Care	0.0						
Acute Care Hospitals	6.3	Mobility			Receiving Tu	ıbe Feeding	1.8						
Psych. HospMR/DD Facilities	0.0	Physically Restrain	ed	0.0	Receiving Me	echanically Altered Diets	29.8						
Rehabilitation Hospitals	0.0												
Other Locations	12.5	Skin Care			Other Resident	Characteristics							
Deaths	81.3	With Pressure Sores		0.0	Have Advance	e Directives	96.5						
Total Number of Discharges	1	With Rashes		0.0	Medications								
(Including Deaths)	16				Receiving Ps	sychoactive Drugs	45.6						

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

		Ownership:		Bed	Size:	Lic	ensure:		
	This	Nong	Nonprofit Peer Group % Ratio		-99	Ski	lled	Al	1
	Facility	Peer			Peer Group		Peer Group		lities
	9	%			Ratio	olo	Ratio	90	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	100.0	92.2	1.08	88.5	1.13	86.7	1.15	85.1	1.17
Current Residents from In-County	100	76.0	1.32	72.5	1.38	69.3	1.44	76.6	1.30
Admissions from In-County, Still Residing	60.0	25.2	2.38	19.5	3.08	22.5	2.67	20.3	2.95
Admissions/Average Daily Census	25.9	95.0	0.27	125.4	0.21	102.9	0.25	133.4	0.19
Discharges/Average Daily Census	27.6	97.5	0.28	127.2	0.22	105.2	0.26	135.3	0.20
Discharges To Private Residence/Average Daily Census	0.0	38.4	0.00	50.7	0.00	40.9	0.00	56.6	0.00
Residents Receiving Skilled Care	87.7	94.3	0.93	92.9	0.94	91.6	0.96	86.3	1.02
Residents Aged 65 and Older	100	97.3	1.03	94.8	1.06	93.6	1.07	87.7	1.14
Title 19 (Medicaid) Funded Residents	98.2	63.8	1.54	66.8	1.47	69.0	1.42	67.5	1.46
Private Pay Funded Residents	1.8	28.5	0.06	22.7	0.08	21.2	0.08	21.0	0.08
Developmentally Disabled Residents	0.0	0.3	0.00	0.6	0.00	0.6	0.00	7.1	0.00
Mentally Ill Residents	56.1	37.9	1.48	36.5	1.54	37.8	1.48	33.3	1.68
General Medical Service Residents	5.3	23.0	0.23	21.6	0.24	22.3	0.24	20.5	0.26
Impaired ADL (Mean)	55.4	49.9	1.11	48.0	1.15	47.5	1.17	49.3	1.12
Psychological Problems	45.6	52.6	0.87	59.4	0.77	56.9	0.80	54.0	0.84
Nursing Care Required (Mean)	5.0	6.3	0.80	6.3	0.81	6.8	0.74	7.2	0.70